

PATENT
Atty. Docket No. SIM-001
(7434/2)

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

FEB 01 2001

APPLICANT(S): Ng *et al.*

TECH CENTER NEW/2100

SERIAL NUMBER: 08/670,119

GROUP NUMBER: 1645

FILING DATE: June 25, 1996

EXAMINER: Hayes, R.

TITLE: Receptor and Transporter Antagonists

#26
A.Q.
2/8/01

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as First-Class Mail, postage prepaid, in an envelope addressed to: Box AF, Assistant Commissioner of Patents, Washington, DC 20231 on this 29th day of January, 2001.

January 29, 2001
Date of Signature
and of Mail Deposit

Thomas Hellenthal

Box AF
Assistant Commissioner of Patents
Washington, D.C. 20231

REQUEST FOR ORAL HEARING

Pursuant to 37 C.F.R. §1.194, Applicants hereby request an oral hearing in the appeal of the final rejection in the above-referenced patent application. An appeal brief was filed on May 15, 2000, a Notification of Non-Compliance with 37 C.F.R. §1.192(c) was mailed on August 1, 2000, a revised appeal brief was filed on August 25, 2000, and the Examiner's answer was mailed on November 29, 2000. Applicants consider an oral hearing desirable for presentation of Applicants' appeal. The fee set forth in 37 C.F.R. §1.17(d) is enclosed herewith, and this request is timely filed, as it is being submitted within two months of the mailing date of the Examiner's answer.

Respectfully submitted,

Daniel A. Wilson
Attorney for Applicants
Testa, Hurwitz, & Thibeault
High Street Tower
125 High Street
Boston, Massachusetts 02110

Date: January 29, 2001

Reg. No. 45,508

Tel. No.: (617) 248-7226

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AP/1645
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PATENT
Attorney Docket No. SIM-001

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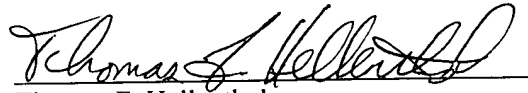
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Thomas F. Hellenthal

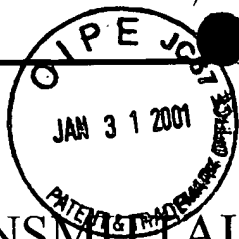
Box AF
Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Submitted herewith is/are:

Transmittal Form (1 page);
Fee Transmittal (1 page) with check for \$135.00;
Request for Oral Hearing (1 page);
Associate Power of Attorney (1 page);
Postcard.

TRANSMITTAL FORM



Application Serial Number	08/670,119
Filing Date	June 25, 1996
First Named Inventor	Ng
Group Art Unit	1645
Examiner Name	Hayes, R.
Attorney Docket No.	SIM-001
BATCH NO. (after allowance)	Not applicable
Patent No.	Not applicable
Issue Date	Not applicable

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FEB 01 2001

TECH CENTER 1600/2900

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] <input type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below) Request for Oral Hearing Associate Power of Attorney
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CORRESPONDENCE ADDRESS

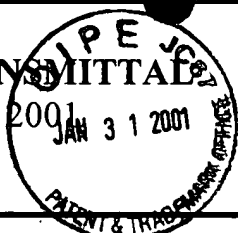
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Respectfully submitted,

 Date: January 29, 2001
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 Daniel A. Wilson
 Attorney for Applicant(s)
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METHOD OF PAYMENT				FEE CALCULATION (continued)																																																																																			
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2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.																																																																																							
3. <input type="checkbox"/> Applicant claims small entity status.																																																																																							
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Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100				Respectfully submitted, <i>Daniel A. Wilson</i> Date: January 29, 2001 Reg. No.: 45,508 Tel. No.: (617) 248-7226 Fax No.: (617) 248-7100 Daniel A. Wilson Attorney for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110																																																																																			